

FEE

\$12749 \$3100

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

16-24792-JAD

Re: Mark Davis : Bankruptcy No. 16-24792-JAD

Mark Davis, Debtor : Chapter 7
: Related to Document No. 1
:
:

Respondent : Robert Shearer (Trustee)

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

Voluntary Petition - : 2nd amendment due to omission of an unsecured creditor

Official Form 6 Schedules (Itemization of Changes Must Be Specified)

Summary of Schedules

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors holding Secured Claims

Check one:

Creditor(s) added

NO creditor(s) added

Creditor(s) deleted

Schedule E - Creditors Holding Unsecured Priority Claims

Check one:

Creditor(s) added

NO creditor(s) added

Creditor(s) deleted

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Check one:

Creditor(s) added

NO creditor(s) added

Creditor(s) deleted

Schedule G - Executory Contracts and Unexpired Leases

Check one:

Creditor(s) added

NO creditor(s) added

Creditor(s) deleted

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Statement of Financial Affairs

Chapter 7 Individual Debtor's Statement of Intention

Chapter 11 List of Equity Security Holders

Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims

Disclosure of Compensation of Attorney for Debtor

Other: _____

PAWB Local Form 6 (07/13)

201 MAY 12 P 12:09
CLERK HF
U.S. BANKRUPTCY COURT
PITTSBURGH

FILED

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Bankruptcy Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

Date: 5/11/2017



Attorney for Debtor(s) [or *pro se* Debtor(s)]

MARK DAVIS
(Typed Name)

2342 SCHOOL ST, PENN HILLS, PA 15235
(Address)

412-417-6559
(Phone No.)

List Bar I.D. and State of Admission

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

Fill in this information to identify your case:		
Debtor 1	Mark Davis	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <u>Western District of Pennsylvania</u>		
Case number (If known)	16-24792-JAD	

FILED

2017 MAY 12 P 12: Check if this is an amended filing

CLERK HF
U.S. BANKRUPTCY COURT
PITTSBURGH

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
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2.1	Bank of America	Last 4 digits of account number <u>1546</u>	\$ <u>117000</u>	\$ <u>0</u>	\$ <u>117000</u>
	Priority Creditor's Name 900 Samoset Drive	When was the debt incurred? <u>6/1/1999</u>			
	Number Street Mail code: DE5-023-03-04				
	Newark DE 19713				
	City State ZIP Code				
	Who incurred the debt? Check one.				
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
2.2	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
	City State ZIP Code				
	Who incurred the debt? Check one.				
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes				

Debtor 1

Mark

First Name Middle Name Last Name

Davis

16-24792-JAD

Case number (if known)

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	FedEx Employees Credit Association FCU Nonpriority Creditor's Name 2731 Nonconnah Blvd Number Street Memphis State TN ZIP Code 38132 City			Total claim
	Last 4 digits of account number 2347 When was the debt incurred? 06/2015 As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			\$ 3176.27
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.2	Firestone Complete Auto Care Nonpriority Creditor's Name PO Box 81315 Number Street Cleveland State OH ZIP Code 44181 City			Last 4 digits of account number 7069 When was the debt incurred? 12/2015 As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify CREDIT CARD
4.3	Verizon Wireless Nonpriority Creditor's Name PO Box 25505 Number Street Lehigh Valley State PA ZIP Code 18002 City			Last 4 digits of account number 0003 When was the debt incurred? 09/2016 As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Utility

Debtor 1 **Mark Davis**
 First Name Middle Name Last Name

Case number (if known) **16-24792-JAD**

Part 2:

Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

Lending Club

Nonpriority Creditor's Name
71 Stevenson, Site 300

Number Street
San Francisco CA 94105
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number **7965** \$ **3080.00**

When was the debt incurred? **07/2015**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit card**

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Debtor 1	Mark	Davis	Case number (if known) _____
	First Name	Middle Name	Last Name
Part 3: List Others to Be Notified About a Debt That You Already Listed			
5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.			
KML Law Group PC		On which entry in Part 1 or Part 2 did you list the original creditor?	
Name BNY Mellon Independence Center, suite 5000		Line 1 of (Check one): <input checked="" type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
Number	Street 701 Market Street	Last 4 digits of account number 1546	
City	PA	State	ZIP Code
Name		On which entry in Part 1 or Part 2 did you list the original creditor?	
Number	Street	Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
City	State	ZIP Code	Last 4 digits of account number _____
Name		On which entry in Part 1 or Part 2 did you list the original creditor?	
Number	Street	Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
City	State	ZIP Code	Last 4 digits of account number _____
Name		On which entry in Part 1 or Part 2 did you list the original creditor?	
Number	Street	Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
City	State	ZIP Code	Last 4 digits of account number _____
Name		On which entry in Part 1 or Part 2 did you list the original creditor?	
Number	Street	Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
City	State	ZIP Code	Last 4 digits of account number _____
Name		On which entry in Part 1 or Part 2 did you list the original creditor?	
Number	Street	Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
City	State	ZIP Code	Last 4 digits of account number _____
Name		On which entry in Part 1 or Part 2 did you list the original creditor?	
Number	Street	Line ____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
City	State	ZIP Code	Last 4 digits of account number _____

Debtor 1 **Mark Davis** Case number (if known) _____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

Total claims from Part 1

6a. Domestic support obligations	\$ _____ 0
6b. Taxes and certain other debts you owe the government	\$ _____ 0
6c. Claims for death or personal injury while you were intoxicated	\$ _____ 0
6d. Other. Add all other priority unsecured claims. Write that amount here.	+ \$ 124228.27
6e. Total. Add lines 6a through 6d.	\$ 124228.27

Total claims from Part 2

6f. Student loans	\$ _____ 0
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ _____ 0
6h. Debts to pension or profit-sharing plans, and other similar debts	\$ _____ 0
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	+ \$ 0
6j. Total. Add lines 6f through 6i.	\$ 124228.27

Service by First-Class Mail

Firestone Complete Auto Care

**P.O. Box 81315
Cleveland, OH 44181-0315**

Fed Ex Employees Credit Association FCU

**2731 Nonconnah Blvd
Memphis, TN 38132-2110**

**Verizon Wireless
P.O. Box 25505
Lehigh Valley, PA 18002-5505**

**Lending Club
71 Stevenson, Suite 300
San Francisco, CA 94105**

**Bank of America
900 Samoset Drive
Mail Code: DE-023-03-04
Newark DE 19713**

**KML Law Group PC
BNY Mellon Independence Center, suite 5000
701 Market Street
Philadelphia PA 19106**

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2017 MAY 12 P 12: 15

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